

**CONTRACTORS STATE LICENSE BOARD**

9821 Business Park Drive, Sacramento, CA 95827-1703
Mailing Address: P.O. Box 26000, Sacramento, California 95826-0026

STATE OF CALIFORNIA

1-800-321-CSLB (2752)
www.cslb.ca.gov

Certification of Work Experience

The Qualifying individual must complete the information below—read the instructions on the next page.

Use a separate form for each employer. Copy this form or contact CSLB if you need additional forms. Please type or print legibly in black ink.

QUALIFYING INDIVIDUAL'S NAME

BUSINESS NAME OF EMPLOYER—OR, IF YOU WERE SELF-EMPLOYED, LEAVE THIS SPACE BLANK AND CHECK THIS BOX ☐

EMPLOYER'S BUSINESS STREET ADDRESS city state ZIP code

MY TIME BASE WORKED WAS (check one): ☐ FULL TIME } FROM month/day/year TO month/day/year
☐ PART TIME }

DURING THIS EMPLOYMENT, I WORKED AT JOURNEY LEVEL OR ABOVE FOR A TOTAL OF : YEARS AND MONTHS.

(If you worked part time, calculate the total years using the following formula: 6 years part time (50%) = 3 years)

WAS YOUR EXPERIENCE OBTAINED WORKING ON YOUR OWN PROPERTY AS AN OWNER/BUILDER? ☐ YES ☐ NO

IF YOU CHECKED YES, USE THE APPROVED "PROJECT LIST" FORM (AVAILABLE FROM CSLB) TO PROVIDE A LIST OF COMPLETED PROJECTS.

LIST ALL SPECIFIC TRADE DUTIES YOU HAVE PERFORMED OR SUPERVISED IN THE CLASSIFICATION YOU ARE APPLYING FOR: (Do not list office work or individual projects.)

TO RECEIVE CREDIT FOR A COMPLETED APPRENTICESHIP PROGRAM:

• SUBMIT A COPY OF YOUR APPRENTICESHIP CERTIFICATE, AND

• ENTER THE BEGINNING AND ENDING DATES OF YOUR (COMPLETED) APPRENTICESHIP PROGRAM: FROM MONTH/DAY/YEAR TO MONTH/DAY/YEAR

TO RECEIVE CREDIT FOR EDUCATIONAL EXPERIENCE:

• SUBMIT A COPY OF YOUR DIPLOMA FOR A FOUR-YEAR DEGREE IN A BUSINESS OR CONSTRUCTION-RELATED FIELD; OR

• SUBMIT TRANSCRIPTS FOR: A TWO-YEAR DEGREE (OR LESS); TECHNICAL TRAINING (MUST INCLUDE COURSE HOURS AND DESCRIPTIONS); AND ALL OTHER DEGREES.

(If you received your degree outside the United States, your transcripts must be evaluated by an accredited evaluation service that does business within the United States.)

CERTIFICATION STATEMENT—CERTIFIER MUST COMPLETE THE FOLLOWING AFTER THE QUALIFIER HAS COMPLETED THE SECTION ABOVE

My relationship to NAME OF QUALIFIER, is or was (check all that apply):

☐ Fellow Employee ☐ Employer ☐ Foreman/Supervisor ☐ Journeyman ☐ Business Associate ☐ Union Representative ☐ Contractor (License #) ☐ Client (if applicant self-employed)

CERTIFIER'S STREET ADDRESS city state ZIP code

PHONE NUMBER FAX NUMBER E-MAIL ADDRESS
() ()

I certify that I have direct knowledge of the work outlined in the experience block shown directly above. I certify under penalty of perjury, under the laws of the State of California, that the information stated above is true and correct.

Signed Print Name

Signed at: City County State Date

Certification of Work Experience—Instructions

NOTE: If, within the past 5 years, you have either qualified for or passed an examination in the classification you are applying for now, do not complete this form.

The Certification Statement at the bottom of the Certification of Work Experience form must be completed by a qualified, responsible person who is able to certify the work experience of the applicant. This form will help the CSLB determine whether the applicant has the experience necessary to become a capable, qualified contractor.

Please check each item below to ensure that you understand how to complete this form:

- ☐ This form must be filled in completely in black ink or the application will be returned.
- ☐ You must use ink or a typewriter—pencil is not acceptable. Original signatures are required—faxed, photocopied, or stamped signatures are not acceptable.
- ☐ All applicants and certifiers must be at least 18 years old.
- ☐ Applicants must list at least **four** years of full time experience within the last 10 years—in the classification applied for. To request a waiver of the examination, an applicant must list at least **five** years of full time experience within the seven years immediately preceding the date of application—in the classification applied for. Self-employed experience (not needing/having a license) and owner-builder experience (working on your own property) will not be considered for a waiver. (*See B&P Code 7065.1(b) or 7065.1(c).*)
- ☐ The applicant's work experience must have been completed at the level of a journeyman, foreman/supervisor, contractor, owner/builder, or self-employed individual, as defined below:
 - A "journeyman" is: an experienced worker who is fully qualified (as opposed to a trainee) and is able to perform the trade without supervision; or, a person who has completed an apprenticeship program. (*Board Rule 825*)
 - A "foreman/supervisor" is a person who has the knowledge and skill of a journey person and directly supervises construction projects.
 - A "contractor" is an individual who is currently a licensed California contractor; a former licensed California contractor; personnel of record on a California license; or an out-of-state licensed contractor. A contractor has the skills necessary to manage the daily activities of a construction business, including field supervision.
 - An owner/builder or self-employed individual must have the skills necessary to manage the daily activities of a construction business, including field supervision.
- ☐ All Certification of Work Experience forms must be submitted with the application. Additional experience cannot be submitted for exam credits after the application is accepted. (*Board Rule 829*)
- ☐ The mandatory Certification Statement must be completed by a qualified and responsible person—an employer; fellow employee; journeyman; union representative; contractor; business associate; or client if the applicant is/was self-employed.
- ☐ The person who completes the Certification Statement must have direct knowledge of the applicant's experience. "Direct knowledge" means personal knowledge of the experience that does not depend on outside information or hearsay. The certifier must be able to certify that the applicant demonstrated a level of knowledge and skill expected of a journey person or better—in the classification applied for.
- ☐ The Certificate of Work Experience form, when filed with an application, becomes the property of the Contractors State License Board and is kept as a matter of record. Make a copy of the completed and signed form for your records—you may be asked to provide further documentation or testimony to verify your experience.
- ☐ **Any licensee whose signature appears on a falsified Certification of Work Experience form, or otherwise certifies false or misleading experience claims submitted by an applicant to obtain a contractor's license, will be subject to disciplinary action. (*B&P Code 7114.1*)**
- ☐ **Anyone who knowingly obtains or offers false or forged documents to be filed, registered, or recorded in any public office in California is guilty of a felony. (*Penal Code 115*)**

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Notice on Collection of Personal Information

CSLB collects the personal information requested on this form as authorized by B&P Code § 30, and CCR 816. CSLB uses this information to identify and evaluate applicants for licensure, issue and renew licenses, and enforce licensing standards set by law and regulation.

Submission of the requested information is mandatory. CSLB cannot consider your application for licensure or renewal unless you provide all of the requested information.

You may review the records maintained by the CSLB that contain your personal information, as permitted by the Information Practices Act.

We make every effort to protect the personal information you provide us, however it may be disclosed in response to a Public Records Act request as allowed by the Information Practices Act; to another government agency as required by state or federal law; or in response to a court or administrative order, a subpoena, or a search warrant.

For questions about the Department of Consumer Affairs' privacy policy or the Information Practices Act, contact the Office of Privacy Protection, 400 R Street, Sacramento, CA 95814, (866) 785-9663, or email privacy@dca.ca.gov.